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PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	09/821,780
		Filing Date	March 28, 2001
		First Named Inventor	David Clive Moshal
		Art Unit	3628
		Examiner Name	Dass, Harish T.
Total Number of Pages in This Submission	2	Attorney Docket Number	23370-711

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Withdrawal as Attorney or Agent and Change of Correspondence Address
<b>Remarks</b>		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT	
Firm or Individual name	U.P. Peter Eng, Reg. No. 39,666, WILSON SONSINI GOODRICH & ROSATI
Signature	
Date	July 6, 2005

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as Express Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Lydia C. Vosburgh		
Signature		Date	July 6, 2005

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PTO/SB/83 (04-05)

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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
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CORRESPONDENCE ADDRESS**

Application Number	09/821,780
Filing Date	March 28, 2001
First Named Inventor	David Clive Moshal
Art Unit	3628
Examiner Name	Dass, Harish T.
Attorney Docket Number	23370-711

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 021971

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

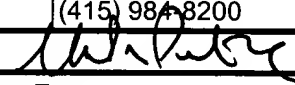
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Address	Three Embarcadero Center				
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Country	USA				
Telephone	(415) 984-8200			Email	
Signature					
Name	U.P. Peter Eng	Registration No.	39,666		
Date	7/6/05	Telephone No.	(650) 493-9300		

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